

Section 2

School-Based Skills Development Services

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TIME STUDY FOR SELF-CONTAINED SETTINGS

Instructions for Completing the School-Based Skills Development Time Study

1 SERVICES

School-based skills development services are *medically necessary* diagnostic, preventive and treatment services identified as "related services" in an eligible student's Individualized Educational Plan (IEP) and include therapeutic interventions designed to ameliorate motor impairments, sensory loss, communication deficits or psycho-social impairments. The goal of school-based skills development services is to improve and enhance a student's health and functional abilities and/or to prevent further deterioration.

1 - 1 Authority

The Medicare Catastrophic Coverage Act of 1988, Section 411(k)(12) permits Medicaid to pay for related services included in a Medicaid eligible recipient's IEP when the services are medically necessary and are covered in the Medicaid State Plan. Effective August 1, 1993, with the approval of the federal Health Care Financing Administration, Utah's Medicaid State Plan was amended to allow coverage of medically necessary services included in the IEPs of Medicaid eligible children ages 2 through 20.

1 - 2 Definitions

The following definitions apply to this program:

CHEC: Child Health Evaluation and Care; Utah's version of the federally mandated Early and Periodic Screening, Diagnosis and Treatment (EPSDT) program designed to ensure Medicaid eligible recipients from birth through age twenty access needed medical care.

Consortium of School Districts: Multiple school districts enrolled with the Division of Health Care Financing (the Medicaid agency) under a single provider application/agreement and reimbursed under a single contract for the provision of school-based skills development services.

Individualized Education Program (IEP): A written program for a student with a disability, developed and implemented in accordance with the Utah State Board of Education *Special Education Rules*.

Qualified Mental Retardation Professional (QMRP): As defined at 42CFR 483.430, Qualified Mental Retardation Professional (QMRP) means a person who has at least one year of experience working **directly** with persons with mental retardation or other developmental disabilities and is one of the following:

- A. A doctor of medicine or osteopathy.
- B. A registered nurse.
- C. An individual who holds at least a bachelor's degree in one of the following professional categories and is licensed, certified or registered, as applicable, to provide professional services by the State in which he or she practices. Professional program staff who do not fall under the jurisdiction of State licensure, certification, or registration requirements must meet the following qualifications:
 - 1. To be designated as an occupational therapist, an individual must be eligible for certification as an occupational therapist by the American Occupational Therapy Association or another comparable body.

2. To be designated as an occupational therapy assistant, an individual must be eligible for certification as a certified occupational therapy assistant by the American Occupational Therapy Association or another comparable body.
3. To be designated as a physical therapist, an individual must be eligible for certification as a physical therapist by the American Physical Therapy Association or another comparable body.
4. To be designated a psychologist, an individual must have at least a master's degree in psychology from an accredited school.
5. To be designated as a social worker, an individual must meet one of the following two criteria:
 - a. Hold a graduate degree from a school of social work accredited or approved by the Council on Social Work Education or another comparable body; or
 - b. Hold a Bachelor of Social Work degree from a college or university accredited or approved by the Council on Social Work Education or another comparable body.
6. To be designated as a speech language pathologist or audiologist, an individual must meet one of the following two criteria:
 - a. Be eligible for a Certificate of Clinical Competence in Speech-Language Pathology or Audiology granted by the American-Speech-Language-Hearing Association or another comparable body; or
 - b. Meet the educational requirements for certification and be in the process of accumulating the supervised experience required for certification.

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7. To be designated as a professional recreation staff member, an individual must have a bachelor's degree in recreation or in a specialty area such as art, dance, music or physical education.
8. To be designated as a professional dietician, an individual must be eligible for registration by the American Dietetics Association.
9. To be designated as a human services professional an individual must have at least a bachelor's degree in a human services field (including, but not limited to: sociology, special education, rehabilitation counseling, and psychology).

Providers: In this manual, providers are enrolled school districts.

Related Services: Developmental, corrective and other supportive services required to assist a student with a disability to benefit from special education. Not all related services identified in the Individuals with Disabilities Education Act (IDEA), Part B Regulations, Section 300.16 are considered “medically necessary services.”

Special Education: Instruction which is specially designed to meet the unique needs of a student with a disability.

1 - 5 Individual Qualifications by Service Setting

- A. Enrolled school districts (hereafter referred to as providers) must employ or contract with qualified

1 - 3 Target Group

Medicaid coverage of school-based skills development services is limited to CHEC eligible students ages 2 through 20 who receive medically necessary services under an IEP from a qualified provider.

1 - 4 Provider Qualifications

School districts or consortiums of school districts that provide special education and related services under Part B of the Individuals with Disabilities Education Act (IDEA) may request enrollment through the Division of Health Care Financing to receive Medicaid funding for school-based skills development services.

individuals to directly deliver or supervise the delivery of school-based skills development services. Individual qualifications vary according to the type of setting where services are delivered.

B. Medicaid reimbursement is available for school-based skills development services provided in:

1. *Self-contained settings* designed to meet the unique needs of a specific population of students with significant disabilities. Students in such settings receive one or more skills development services on a daily basis. For purposes of this program, self-contained settings include special purpose day schools, self-contained classrooms in regular schools (including preschool programs) and self-contained resource rooms; and/or
2. *Itinerant settings* including, but not limited to, regular classrooms, non-self-contained resource rooms, the child's residence or other non-self-contained settings where school districts provide special education and related services. Students in these settings do not necessarily receive skills development services on a daily basis.

C. The matrix on the following page shows, by service setting, the licensure, certification or other credentials required to deliver or to supervise the delivery of Medicaid covered school-based skills development services described in Chapter 2 - 1, Covered Services, of this manual.

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Licensure, Certification or Other Credentials Required

** LICENSED ↓	SETTING				* AUTHORIZED TO DELIVER AND SUPERVISE ↓
	Itinerant Settings	All Self Contained Settings	Self Cont. Settings for Individuals with Devel. Disabilities/ Mental Retardation	Preschools	
physician	x	x	x	x	all services
R. N.	x	x	x	x	motor, nursing
mental health practitioner	x	x	x	x	behavioral health
speech/language pathologist	x	x	x	x	communication
audiologist	x	x	x	x	vision & hearing. adaptation services
physical therapist	x	x	x	x	motor
occupational therapist	x	x	x	x	motor, personal
*** CERTIFIED ↓					
educational psych.	x	x	x	x	behavioral health
school psycholgist	x	x	x	x	
school social worker	x	x	x	x	
school counselor	x	x	x	x	
school speech/ language therapist	x	x	x	x	communication
school vision & hearing specialist	x	x	x	x	vision & hearing adaptation services
**** OTHER ↓					
Qualified Mental Retardation Professional (QMRP)			x	x	motor, communication, personal, vision and hearing

* Authorization also covers evaluation, assessment and provision of information and skills training to families.

** Practicing within the scope of their license in accordance with Title 58, Occupational and Professional Licensing, Utah Code Annotated, 1953 as amended.

*** Practicing in accordance with the Utah State Office of Education Requirements for Certification, revised 7/1/93 as amended; or (as applicable) practicing in accordance with the Utah State Office of Education Rules, Appendix D, State Certification and Endorsements, May 1993.

**** See Chapter 1 - 2 for definition of Qualified Mental Retardation Professional.

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1 - 6 Service Standards

In addition to specific program standards described in this Manual, a provider will be held accountable to provisions contained in its Provider Agreement and Contract with the Medicaid agency and the standards contained in the Utah State Board of Education *Special Education Rules*. A Provider Agreement and Contract must be on file with the Medicaid agency before a provider receives Medicaid reimbursement.

1 - 7 Client Rights

A. Providers will have a process in place to ensure that:

1. a student or a student's guardian has voluntarily chosen to receive Medicaid reimbursed skills development services; and
2. **all** students with similar needs and conditions are offered school-based skills development services and a student's Medicaid eligibility is not considered when developing or delivering needed services.

B. The Medicaid agency and the provider will jointly ensure that the billing and payment procedures utilized for this program do not jeopardize a student's right to a free and appropriate public education under 20 U.S.C. 1401(a)(18).

2 SCOPE OF SERVICES**2 - 1 Covered Services**

A. School-based skills development services include:

1. Evaluation and Assessment for the purpose of identifying and documenting a special education student's skills development needs.
2. Motor Skills Development designed to enhance a student's fine and gross motor skills including muscle coordination and strength, ambulation, range of motion, grasp and release and oral motor functioning.
3. Communication Skills Development designed to enhance a student's ability to communicate through the development of functional expressive speech or sign language, functional use of adaptive equipment and devices or improved oral-motor functioning.
4. Nursing and Personal Services
 - a. Nursing services designed to enhance or maintain a student's health status including such services as medication administration, seizure control, treatment and repositioning to maintain skin integrity, tube feeding, catheterization and weight management.
 - b. Personal services designed to maintain or develop a student's functional abilities through training in daily living skills (ADL skills) including toileting, hand washing, oral motor, eating and bathing skills.
5. Behavioral Health Services designed to

mitigate behaviors such as aggression, self-abuse, property destruction, severe noncompliance or withdrawal when those behaviors significantly impact a student's ability to benefit from special education. Providers requesting Medicaid reimbursement for *behavioral health* skills development services must have a written agreement with the local mental health center(s) serving their school district. The agreement must clearly describe the respective roles of each agency, the services each provides and how referrals between agencies are handled.

6. Vision and Hearing Adaptation Services (necessitated by a student's absence or loss of vision and/or hearing) are specifically designed adaptation training services to develop/enhance a student's functional abilities to assist him or her to benefit from special education.
7. Information and Skills Training to Families includes face-to-face, telephone or written communication *for the purpose* of assisting parents or guardians in understanding and implementing the skills development programs their child needs. This service includes the time spent informing and training the parent or guardian at the formal IEP meeting.

B. Medicaid coverage is available for services identified in Chapter 2 - 1(A) only when these services are:

1. provided to a Medicaid eligible recipient through an enrolled provider;
2. identified as a related service in an eligible student's IEP;
3. supported by documented, professional evaluation(s);
4. specifically designed to enhance a student's health and functional abilities and/or to prevent further deterioration;
5. necessary to assist the student to benefit from special education;
6. provided as an individual or group therapeutic intervention by, or under the direct supervision of, qualified individuals; **and**
7. provided and billed in amounts that are reasonable given the documented needs and condition of a particular student.

2 - 2 Non-Covered Services/Activities

A. The following services and activities are outside the scope of school-based skills development services and are **not** reimbursable under this program:

1. durable and non-durable medical equipment (including adaptive equipment and assistive technology devices), appliances and supplies. When medically necessary, these items are available to a Medicaid eligible student through other programs and enrolled providers;
2. services provided prior to the implementation (or subsequent to the expiration) of a student's IEP;
3. services not identified in a student's IEP; or
4. services identified in a student's IEP, but the nature or purpose of the activity is:
 - a. academic or educational and covered under the State's educational "core curriculum" including addition, subtraction, multiplication, letter and sound identification, reading, history, science, and other services that do not meet the criteria of "medically necessary services" as described in Chapter 2 - 1, Covered Services;
 - b. to teach consumer and homemaker skills including, but not limited to, shopping, budgeting, bed making, table setting, vacuuming, dishwashing and laundry skills;
 - c. extracurricular, including training and participation in regular physical education,

recreational and cultural activities, athletics/sports, special interest/leisure activities; **or**

- d. vocational or job training, and is designed to prepare a student to obtain or maintain paid or unpaid employment (such as objectives written to address specific job skills and work habits, use of public transportation, community awareness and access, and following work related directions).

2 - 3 Service Coordination

- A. The provider is responsible to coordinate the provision of school-based skills development services with students' primary and specialty care providers.
- B. School-based skills development services are covered as "expanded benefits" available to eligible individuals under the CHEC program. Providers should be familiar with the CHEC program's coverage of preventive, diagnostic, treatment and outreach services in order to assist families to appropriately utilize the Medicaid benefits available to eligible children.

3 SERVICE PAYMENT**3 - 1 Standards Applicable to All School District Providers**

- A. Medicaid regulations prohibit payments to governmental agencies in amounts which exceed an agency's costs to provide a service. School districts, as governmental entities, are not allowed to make a profit.
- B. Under the school-based skills development program:
1. *Costs* are defined as the school district's total compensation (salaries and benefits) of employees and contractors providing "hands-on" special education and related services.
 2. *Allowable costs* are the percentage of costs directly incurred by the provider to deliver covered skills development services.

3 - 2 Required Information for Rate Setting

- A. Newly enrolled school districts may be offered an *interim rate* for services if the Medicaid agency has already established a rate for comparable services. In such cases, the provider's contract will indicate that Medicaid's payments are not cost-based and are subject to cost settlement to determine the provider's actual allowable costs and establish a final payment.
- B. The following information is required in order for the Medicaid agency to determine a provider's actual allowable costs:
1. The specific skills development service(s) the

provider intends to cover under Medicaid;

2. The setting(s) in which the covered service(s) will be delivered;
 3. The names of the individuals who will directly supervise and/or deliver the covered service(s); each of those individuals' total annual salary and benefits; and the time spent by each of those individuals in the covered setting (See item C. below).
 4. The total number of school days available to students in the district; and
 5. The total number of Medicaid and non-Medicaid eligible students receiving covered services (applies to self-contained settings only).
- C. Time studies are used to determine the time spent by qualified individuals in covered and non-covered activities. A facsimile time study and instructions are found at the end of this section (Section 2) in this manual. Providers will oversee and ensure that, during the reporting period, time study participants appropriately document their time in 15 minute increments to the categories listed below:
1. direct allowable activities (columns 1, 2 and 3);
 2. direct non-allowable activities (columns 4 and 5);
 3. indirect activities (column 6); or
 4. unrelated activities (column 7).

NOTE: Time spent in indirect activities is allocated

based on the ratio of time spent in direct “allowable” activities versus direct “non-allowable” activities.

- D. Approved time study, cost allocation and time allocation reporting formats are available from the Medicaid agency.
- E. Providers must confer with the Medicaid agency prior to collecting cost information and conducting time studies to ensure both parties agree to the scope and content of required reporting.
- F. **Rates for services provided in self contained settings are based on the provider’s average daily allowable cost to deliver services.**
- G. **Rates for services provided in itinerant settings are based on the provider’s average allowable cost per 15 minutes of service.**

3 - 3 Claims Processing

- A. Providers must be able to submit claims using *the Medicaid agency’s prepackaged software which runs on an IBM compatible computer.*
- B. Upon enrollment in the Medicaid program, providers will receive instructions, software and assistance from the Medicaid agency to enable them to submit monthly claims containing the following required information:
 - 1. The names of **all** (Medicaid and non-Medicaid) students who received skills development services during the billing period;
 - 2. Each student’s date of birth and Social Security Number; and
 - 3. The number of units of covered service(s) each student received during the billing period.
- C. The Medicaid agency will match the provider’s billing tape against Medicaid’s eligibility file. Payment will be made to the provider for each student who:
 - 1. was Medicaid eligible during the billing period; **and**
 - 2. did not have third party insurance coverage during the billing period.

4 RECORD KEEPING**4 - 1 Required Documentation; Self-Contained Settings**

- A. The school-based skills development provider must maintain sufficient records to document that, for each daily unit of service billed to Medicaid, the identified student met two conditions:
1. did, in fact, receive one or more covered skills development service(s); and
 2. received the service(s) pursuant to an IEP which met the requirements found in the Utah State Board of Education, Special Education Rules, Chapter IV, May 1993, or as hereafter amended.
- B. Each provider must also maintain records to document that the individual(s) who provided services billed to Medicaid met the required licensure, certification or other criteria described in Chapter 1 - 6 (B), Service Standards, of this manual, or were supervised by an individual who met the requirements.

4 - 2 Required Documentation; Itinerant Settings

Providers delivering services in itinerant settings (non-self contained settings where services are reimbursed in 15 minute units) must meet the requirements outlined in Chapter 4 - 1 above **and** must *additionally* ensure that logs or contact notes specifically document the following information:

- A. the date of each billed service;
- B. the number of 15 minute units billed for each date of service;
- C. the nature or purpose of each billed service as it relates to the student's IEP; and
- D. the name of the individual(s) who provided the billed service.

SCHOOL - BASED SKILLS DEVELOPMENT PROGRAM

TIME STUDY FOR SELF-CONTAINED SETTINGS



SCHOOL: _____

DATE: _____

Name of Staff Member: _____

TIME ↓	1 Evaluation & Written Assessment	2 Covered Individual & Group Skills Development	3 Information & Skills Training to Families & IEP	4 Academic PE -Recreation Job Training Domestic	5 Activities & Training not on IEP	6 In service Paperwork/ prep Travel Supervision	7 Unrelated time/Personal Time/Unpaid lunch
7:30-7:45							
7:45-8:00							
8:00-8:15							
8:15-8:30							
8:30-8:45							
8:45-9:00							
9:00-9:15							
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2:15-2:30							
2:30-2:45							
2:45-3:00							
3:00-3:15							
3:15-3:30							
3:30-3:45							
3:45-4:00							
Total Minutes							

INSTRUCTIONS FOR COMPLETING THE SCHOOL-BASED SKILLS DEVELOPMENT TIME STUDY

SCHOOL DISTRICT INSTRUCTIONS: Prior to implementing a time study, a school district must do four things:

1. identify the specific skills development services it wishes to cover under the Medicaid program. Refer to the Medicaid Provider Manual for School-Based Skills Development Services, Chapter 2 - 1 for Medicaid-covered services;
2. identify the setting(s) where the service(s) will be delivered and the individuals who will deliver or directly supervise the delivery of the covered services. Refer to Chapter 1 - 5 of the Medicaid Manual for approved settings and supervisor qualifications;
3. contact the Medicaid agency to determine if the district's proposed service plan (as identified above) will require a time study, and if so, to jointly determine scope of the study (the individuals and settings to be studied) and the time period to be studied; and
4. ensure that all participants have received instruction as necessary to accurately complete the required time study.

INSTRUCTIONS FOR INDIVIDUALS PARTICIPATING IN THE TIME STUDY

1. During the agreed upon time period, each time study participant must carefully document his or her daily activities in one-quarter (.25) hour time increments to the categories described below.
2. When the time study participant is involved in more than one activity during a 15 minute time period, he or she should indicate the activity which required the majority of the time.
3. If a time study participant is unable to determine how to log an activity, he or she may contact the Medicaid agency for assistance.

DOCUMENTING DIRECT and INDIRECT SERVICES and ACTIVITIES**Column 1: Evaluation and Written Assessment**

Includes time spent by qualified individuals conducting and documenting evaluations / assessments for the purpose of identifying the skills development needs of students receiving services under an IEP.

Column 2: Individual and Group Skills Development Services

Includes time spent by qualified individuals, or by individuals under their direct supervision, directly providing or monitoring one or more students' *covered skills development services* (those described in the Medicaid Provider Manual for School-Based Skills Development Services, Chapter 2 - 1, Covered Services).

Column 3: Information and Skills Training to Families

Includes time spent assisting and training a student's parent or guardian to implement the student's skill's development program as outlined in the IEP. This category also includes time spent at IEP meetings reviewing a student's progress in Medicaid covered, IEP services, and discussing modifications and revisions to the student's IEP objectives.

Column 4: Academics / PE / Recreation / Job Training etc.

Includes time spent on goals, objectives or other activities, *whether included in the IEP or not*, which are:

- a. part of the educational "core curriculum" and/or have an academic focus (for example, addition, subtraction, letter and sound identification, reading, history, science or other activities that do not meet the related service/medical necessity skills development criteria); or
- b. for the purpose of training or participating in sports, recreation, leisure, community integration, socialization, or are directed at training in vocational, job or housekeeping skills.

Column 5: Activities and Training not Specified in the IEP

Includes time spent in activities prior to the development of a student's IEP, time spent after the expiration of an IEP, time spent on "informal" activities or objectives not specifically included in the student's IEP. *Also include here the time spent in skills development services that do not meet the requirements for Medicaid coverage.*

Column 6: Indirect Activities

Include in column 6, time spent in any of the following:

- staffings; consultations with administrators or direct care staff;
- service planning / preparation / curriculum development;
- "routine" documentation and paperwork (*show time spent documenting evaluations / assessments in column 1*);
- staff development activities such as workshops and in services;
- breaks
- travel and transportation (all time spent traveling to and from a site where services are to be provided).

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Column 7: Unrelated Tasks and Activities/Unpaid Time

Include in this column all time spent in programs, classrooms and other settings not covered in the scope of the time study; any unpaid time, including unpaid lunch breaks; “personal time,” “down time” and time spent on general administrative or personnel requirements, etc.